STATE OF NEW HAMPSHIRE RECEIVED 2017 Statement of Income and Expenses

for LOBBYISTS

(RSA Chapter 15)

AUG 1 () 2017

PLEASE PRINT

NEW HAMPS that DENAENT OF STATE

l. Name of Lobbyist(s	MARK HOU	INSELL	· · · · · · · · · · · · · · · · · · ·	DEPARTMENT OF	,,,,,,
II. Name of lobbyist's	partnership, firm o	or corporation, if an	y:		
MARK HOU	VSELL & SOA e of partnership, firm o	r corporation)			
190 BOX 3081		CONUAY (Town/City)	NH	038/8 (Zip Code)	
Business Address: (Str	•	` */			
(Co) 960-29 (Telephone)	46 () <i>V/A</i> (Fax)	e-mail proc	essand courier@	gmail.com
III. This statement co reportable expense tr			ts for each client, OR you any one client).	u may file a separate rep	ort for
			he reporting date relative		
TEAMSTERS LO	CAL 633 (Full Name of Client)	53 B-07/570U/	V RO. PO BOX 8	TO MANCHESTER,	NH 03105
<u>OR</u>			-		
All reportable transi unrelated to any partice	•	st (including the lobb	oyist's family), or the lobb	ying firm listed below wh	sich are
IV. Date of Report Reports cover: activi	April 26, 2017	tion to 3/31/17	July 26, 2017 dactivity from 4/1/17 to 6/3		
•	October 25, 2017 activity from 7/1/17 to	C	January 31, 2018 activity from 10/1/17 to 1	[]	
			transactions made sine Secretary of State's Offu		/ 1.
VI. Check if additions	il reports are attach	ed:			
☐ If you have receive	ed fees or made expe	nditures, you must fi	le Addendum A– Fees ar	d Expenses	
If you have paid ar Expense Reimburseme		bursed expenses, you	ı must file Addendum B -	- Report of Honorariums of)r
☐ If you, your firm, o	or your family has ma	ide political contribu	tions, you must file Adde	ndum C- Political Contri	butions
and complete to the bes	SA 15-B, RSA 14-C st of my knowledge a	and RSA 664 and he	reby swear or affirm that	the foregoing information	is true
/ sent A	found		AUGUST	8, 2017	
(Signature of lobbyist)	 			(Date)	
MARK HOUNS (Print Name of lobbyis					